SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. Washburn, WI 54891

(715) 373-6138

Authorized Agent:

Address to send permit _

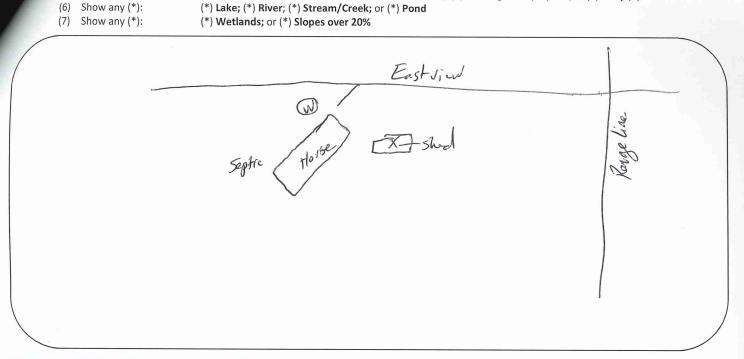


Permit #:	19-0003
Date:	1-4-19
Amount Paid:	cush \$75.00
Refund:	

INSTRUCTIONS: No p Checks are made pays DO NOT START CONS	able to: B	ayfield Co	ounty Zoning [Department.	a de juite	ld Co. Zoning	Dep	<u>t.</u>		FILL OU	T IN IN	IK (<mark>NO PE</mark>	ENCIL)	
TYPE OF PERMIT R	FOLIEST	ED_	LAND	LISE D CA	NUTAD	V DDIVV		CNIDITIONA	VI LICE					
Owner's Name:	×			USE SA		Y PRIVY ng Address: 5 Eastvi w			/State/Zi				Telephon	DTHER
Kevin	M	elli	<u>t</u> +				Ro	1	m Ki	sel WI	59	1847		
Address of Property:	- 1		2			State/Zip:							Cell Phon	
Contractor:	astv	iew)	Rd			ractor Phone:	1000			4841	218 - 348 - 8			
Contractor.					Contractor Phone: Plumber:								Plumber	Pnone:
Authorized Agent: (P	erson Sign	ing Applic	ation on behalf	of Owner(s))	Agen	t Phone:	Age	ent Mailing Ad	Idress (in	clude City/State	/Zip):	Authorization		
PROJECT LOCATION	Legal	Descript	ion: (Use Ta	x Statement)	Tax II	3715	7				nent: (Sho	owing Ownership) 5 70 840		
NE 1/4, 1	1E 1	/4	Gov't Lot	Lot(s)	CSM	SM Vol & Page CSM Doc # Lot(s) No. Block(s) No.						division:		
Section 36	_ , Towr	nship	18 _{N, Ra}	ange <u>09</u>	N	Town of:	JJJ				Lot S	Size	Acreag	32.68
	Mc D	ranartı	/I and within	200 foot of Div	ou Chuo			Distance Student		f Cl !!				75.0
	Creek			f Floodplain?	72.549	eam (incl. Intermitte rescontinue —		232	- 4	from Shorelin	e : feet	Is Prope Floodplai		Are Wetlands Present?
Shoreland -	☐ Is P	roperty	/Land within	1000 feet of La	ike, Por	nd or Flowage		Distance Stru	icture is	from Shorelin	e :	□ Ү		¥Yes
					If y	escontinue –	→ .		feet	AN	lo	□ No		
☐ Non-Shoreland														
Value at Time	H 16	-, -, -,			FZ 6					-			Territ.	
of Completion								# of bedrooms			nat Ty			Type of
* include donated time &						Foundation	n	in	11.5		Sanitary System the property?			Water
material								structure		is on	ne pr	operty		property
	New	/ Const	ruction	★ 1-Story		☐ Basement	t	□ 1		unicipal/City				☐ City
\$ 0			Iteration	☐ 1-Story +										Well
9,000		version		2-Story	✓ Arajal 3 Sanitary (Exist									
			ness on		Use None Privy (Pit) or Protable (w/ser								200 gallo	<u>n)</u>
		erty			✓ Year Round ☐ Compost Toilet							inti detj		
										one				
Existing Structure	: (if per	mit beir	g applied for	is relevant to i	t)	Length:			Width	1:		Hei	ght:	
Proposed Constru					4.5	Length:			Width			Hei		
O STATE OF THE STATE OF							掛	32	HC+	14				Samone
Proposed Use	е	1				Proposed Stru	icture			and the	ľ	Dimension	S	Square Footage
			Principal S	Structure (fire	t struc	ture on proper	rty)				(Х)	
			Residence	(i.e. cabin, h	unting	shack, etc.)					(Х)	
Residential U	Isa			with Loft	L						(X)	
	-			with a Porc with (2 nd) P							1	X х)	
				with a Deck							(X)	
				with (2 nd) D							(Х)	
☐ Commercial	Use			with Attach	ed Ga	rage					(Х)	
						sleeping quart					(Х)	
						ite)					(Х)	9)
☐ Municipal U	se			Alteration (s	0.00	-1 1					(X)	
1		X		Building (s			-10.				(1		2)	448
			Accessory	building Add	ition//	Alteration (spe	есту) _				ſ	Х)	
			Special He	e: (eynlain)							1	Х	-1	j.
	□ Special Use: (explain)□ Conditional Use: (explain)										(X)	
			Other: (ex								(X)	
						TING CONSTRUCTION			IT WILL BE	SULT IN DENALT	FS		,	
I (we) declare that this ap (are) responsible for the o			y accompanying	information) has be	en examin	ed by me (us) and to t	the best	of my (our) knowle	edge and b	elief it is true, corre	ct and co			
result of Bayfield County property at any reasonab	relying on le time for	this inform the purpos	ation I (we) am (e of inspection.	are) providing in or	with this a	application. I (we) cons	sent to co	ounty officials cha	arged with	administering count	y ordina	nces to have ac	cept liability	above described
Owner(s):	ole Owner	rs listed	on the Deed A	All Owners must	sign <u>or</u> l	etter(s) of authori	ization	must accompa	any this a	pplication)	Da	te <u>//</u> 2	1/20	19

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) <u>Attach</u> Copy of Tax Statement

Date



Please complete (1) - (7) above (prior to continuing)

Show / Indicate:

(3)

(4)

(5)

(6)

Show:

Show: Show any (*):

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measureme	nt		Description	Measure	ement
Setback from the Centerline of Platted Road	-80 90	Feet		Setback from the Lake (ordinary high-water mark)		Feet
Setback from the Established Right-of-Way	50	Feet		Setback from the River, Stream, Creek	350	Feet
				Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	50	Feet				
Setback from the South Lot Line	1185	Feet		Setback from Wetland	120	Feet
Setback from the West Lot Line	613	Feet		20% Slope Area on the property	☐ Yes	□No
Setback from the East Lot Line	697	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	120	Feet		Setback to Well	120	Feet
Setback to Drain Field		Feet			, ,	
Setback to Privy (Portable, Composting)		Feet				
Prior to the placement or construction of a structure within ten (10) feet	of the minimum required	setback t	he ho	oundary line from which the setback must be measured must be visible from one	proviously suprave	d corpor to the

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	1-215	# of bedrooms:	Sanitary Date: 4/8/15					
Permit Denied (Date):	Reason for Denial:								
Permit #: 19-0003	Permit Date: /- 4-/	1-19							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Record □ Yes (Fused/Contigu	ous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes No☐ Yes ☐ No	Affidavit Required ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No					
Granted by Variance (B.O.A.) ☐ Yes No Case #:		Previously Granted by Ves No	/ Variance (B.O.A.)	e #:					
	Durner on-site	Were Property Lines Represented by Owner Was Property Surveyed Wes							
Inspection Record: owner on-s.te and indicate toda compliant as proposed fond is no because of feilure and culvert iss	ted location of nan-made and ives, according to	proposed sher being removed	d. Appeals I by WDNR	Zoning District (A6-1) Lakes Classification ()					
Date of Inspection: 1/2/19	Inspected by:	1 Norwood		Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Attac			THE PARTY						
	habita	not be used for hation. No water u							
Signature of Inspector: Todal Novwoo	mvs+	ure in structure. meet and m	aintain setbacks.	Date of Approval: 1/3/19					
Hold For Sanitary: 🗌 Hold For TBA: 🔲 _	Hold For Affic	davit: 🗌 📗	Hold For Fees:						

City, Village, State or Federal May Also Be Required

SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0	003			ssued	d To: Ke	vin &	Anna Merr	ritt							
Location:	NE	1/4	of	NE	1/4	Section	36	Township	48	N.	Range	9	W.	Town of	Oulu	
Gov't Lot			L	_ot		Blo	ck	Sul	bdivisio	n				CSM#		

For: Residential Accessory Structure: [1-Story; Shed (14' x 32') = 448 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): May not be used for human habitation. No water under pressure in structure. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

January 4, 2019

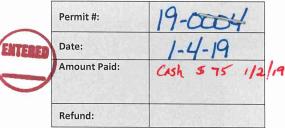
Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Address to send permit

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



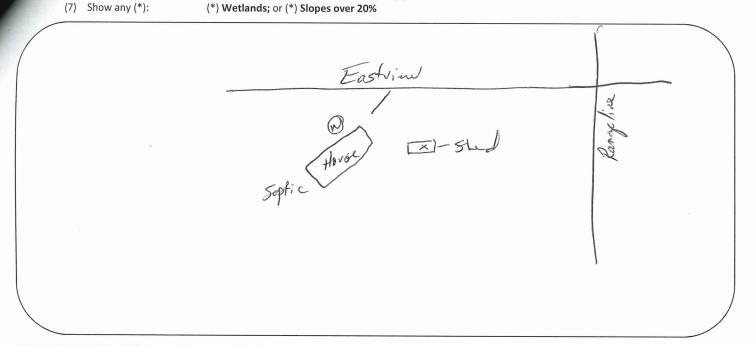


Attach Copy of Tax Statement

If you recently purchased the property send your Recorded D

Checks are made pay						Bayfie TO APP	ld Co. Zoning [LICANT.			FILL OUT	TIN INK (NO	PENCIL)		
TYPE OF PERMIT I	REQUEST	ΓED→	LANI	USE	□ SA	NITAR	Y D PRIVY	CONDITI	ONAL USE	☐ SPECIAL	USE B.C	D.A. □ C	OTHER	
Owner's Name:			D			-	ng Address:		City/State/2	All the second s	001 1 10	Telephon		
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Revis me. Address of Property	:					City/	State/Zip:	0 0 0	FIDN N	ing our	5/0//	Cell Phon		
6855 EA	27 00	iw p	.1			Ir	VOV RIVOT L	NI 54	1843			218-3	348-8719	
Contractor:		, , , ,	U .				ractor Phone:	Plumber:	0 / /			Plumber	Phone:	
										f.				
Authorized Agent: (Person Sign	ning Appli	cation on behal	f of Owner	r(s))	Agen	t Phone:	Agent Mailir	ng Address (i	nclude City/State	/Zip):	Written A	Authorization	
												☐ Yes	□ No	
PROJECT	Legal	Descrip	tion: (Use Ta	ax Statem	nent)	Tax II					Recorded Do	cument: (Sho	owing Ownership)	
LOCATION				an ottatett	neric)		37157				DO 1100		70840	
NE 1/4, 1	1 1 1	1/4	Gov't Lot	Lo	ot(s)	CSM	Vol & Page CS	SM Doc#	Lot(s) No.	Block(s) No.	Subdivision:			
		53												
Section 36	, Tow	nship _	48 N, R	ange	9	w	Town of:			Lot Size	Acrea	-		
	_						UHLA					152	.68	
	/SIs F	roperty	/Land withir	300 fee	et of Riv		am (incl. Intermittent)	Distance	Structure i	s from Shoreline	e: Is Pro	operty in	Are Wetlands	
X Shoreland →			dward side o				escontinue —	350		1	feet Floodp	lain Zone?	Present?	
	☐ Is F	roperty	/Land withir	1000 fe	eet of La		nd or Flowage			s from Shorelin	C .	Yes	Yes	
						іт у	escontinue -	22	1 m		reet	₹No	□ No	
☐ Non-Shoreland								*						
Value at Time			de la constitución											
of Completion								# of bedroo	ms	Wh	at Type of		Type of	
* include		Proje	ct	# 0	of Stori	ies	Foundation	in	illis		Sanitary Syste		Water	
donated time & material								structu	re	Is on t	he property?		property	
material	XNev	v Const	ruction	№ 1-S	Story		☐ Basement	□ 1	□ N	lunicipal/City			☐ City	
	☐ Add	Addition/Alteration 1-Story +				- Loft	☐ Foundation	1 2		New) Sanitary		_ \{Well		
6 500	☐ Con	☐ Conversion ☐ 2-Story					X Slab	□ 3		Sanitary (Exists) Specify Type Movad				
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	☐ Run a Business on													
	a busi	ness on				Use	Non	e 📙 P	ortable (w/serv	vice contract)				
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v or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** North (N) on Plot Plan Show / Indicate: Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (3) All Existing Structures on your Property Show: (4) (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Show any (*): (6) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond



Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement		Description	Measuren	ment	
Setback from the Centerline of Platted Road	-80 70 Feet		Setback from the Lake (ordinary high-water mark)		Feet	
Setback from the Established Right-of-Way	50 Feet		Setback from the River, Stream, Creek	350	Feet	
			Setback from the Bank or Bluff		Feet	
Setback from the North Lot Line	50 Feet	1				
Setback from the South Lot Line	1185 Feet		Setback from Wetland	120	Feet	
Setback from the West Lot Line	613 Feet		20% Slope Area on the property	☐ Yes [No	
Setback from the East Lot Line	697 Feet		Elevation of Floodplain		Feet	
Setback to Septic Tank or Holding Tank	120 Feet		Setback to Well	120	Feet	
Setback to Drain Field	Feet					
Setback to Privy (Portable, Composting)	Feet					
Prior to the placement or construction of a structure within ten (10) fee	t of the minimum required setback	the h	oundary line from which the setback must be measured must be visible from one	e manufactules are according	and the same at a	

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	Sanitary Date: 4/8/15								
Permit Denied (Date):	Reason for Denial:									
Permit #: 19 -0004	Permit Date: 1-4	4-19								
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes) Yes (Fused/Contigue) Yes Ye	ous Lot(s)) No	Mitigation Required Mitigation Attached	□ Yes No No No No	Affidavit Required ☐ Yes No Affidavit Attached ☐ Yes No						
Granted by Variance (B.O.A.) ☐ Yes 🗶 No Case #:		Previously Granted by ☐ Yes ▼No		se #:						
	DWNel on-site	Were Property Lines Represented by Owner Was Property Surveyed Yes No								
Inspection Record: OWNEY on sike and ; Appears code complian	indicated locas	from of Piope Pond is man-made	used shed. It and being removes	Zoning District (A6-1) Lakes Classification ()						
Date of Inspection: 1/2/19	Inspected by:	Norwood		Date of Re-Inspection:						
Condition(s): Town, Committee or Board Conditions Attac	ched?									
May not be used for human habitation. No water under pressure in structure. Signature of Inspector: May not be used for human habitation. No water under pressure in structure. Date of Approval:										
Hold For Sanitary: Hold For TBA:	101	1/3/1								
Hold For TBA:	Hold For Affic	fidavit: Hold For Fees: In the second sec								

Village, State or Federal
Also Be Required

USE - X

NITARY -

CONDITIONAL -

BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0004				Issued To: Kevin & Anna Merritt											
Location:	NE	1/4	of	NE	1/4	Section	36	Township	48	N.	Range	9	W.	Town of	Oulu	
Gov't Lot			L	.ot		Blo	ck	Sul				CSM#				

For: Residential Accessory Structure: [1- Story; Shed (12' x 32') = 384 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): May not be used for human habitation. No water under pressure in structure. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

January 4, 2019

Date